

1927

R. A. WATKINS PRINTING CO., PHOENIX

PLACE OF DEATH

ARIZONA STATE BOARD OF HEALTH

County Maricopa
District No. 3
Town Mesa
Or City

BUREAU OF VITAL STATISTICS

State Index No. 188

County Registered No. 7480

Local Registrar's No. 266

ORIGINAL CERTIFICATE OF DEATH

No. _____ St. _____
(If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

FULL NAME

Paul W. Crismon

PERSONAL AND STATISTICAL PARTICULARS

SEX Male Color or Race White SINGLE S
Indian Black MARRIED
Chinese Mexican WIDOWED
or DIVORCED

DATE OF BIRTH June 29 1915
(Month) (Day) (Year)

AGE 4 yrs. 4 mos. 19 days If less than 1 day
hrs., or min.

OCCUPATION
(a) Trade, profession or particular kind of work
(b) General nature of industry, business, or establishment in which employed or (employer)

BIRTHPLACE (State or country) Ariz

NAME OF FATHER J. W. Crismon

BIRTHPLACE OF FATHER (State or country) Wah

MAIDEN NAME OF MOTHER Annie Taylor

BIRTHPLACE OF MOTHER (State or country) Wah

The Above Is True to the Best of My Knowledge
(Informant) Mrs. J. W. Crismon
(Address) Mesa

PLACE OF BURIAL OR REMOVAL Mesa Cemetery DATE OF BURIAL OR REMOVAL Nov 20 1917

UNDERTAKER Mesa ADDRESS Mesa

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH Nov 19 1917
(Month) (Day) (Year)

I hereby certify, that I attended deceased from Nov 19 1917 to Nov 19 1917; that I last saw him alive on Nov 19 1917, and that death occurred on the date stated above at 9 P.M. The DISEASE or INJURY causing Death was as follows:

Croup (membranous?)
(Duration) yrs. mos. 1 days

Was disease contracted in Arizona? Yes

If not, where?

CONTRIBUTORY (Duration) yrs. mos. days

(Signed) Edmund McNeill
"No. 1917" (Address) Mesa, Ariz

*In death from Violent Causes state (1) Means of Injury, and (2) whether Accidental, Suicidal, or Homicidal.

LENGTH OF RESIDENCE

At place of death yrs. mos. ds. In Arizona yrs. mos. ds.

Former or Usual Residence

Filed Nov 20th 1917 J. E. Drane
Local Registrar.

Filed 12-15 1917 W. R. Brown
County Registrar.

FILL OUT ALL BLANKS

AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in Plain Terms, that it may be properly classified. If any item can not be obtained insert word "unknown". Make every effort possible to secure this information. Incorrect certificates will be returned for correction.